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CONFIRMATION NO. 3677

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|---|---|-----------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/531,598 | FILING OR 371(c) DATE 11/25/2005 RULE | CLASS 424 | GROUP ART UNIT 1615 | ATTORNEY DOCKET NO. 3029-1002 | |
| APPLICANTS Anders Pettersson, Lilla Edet, SWEDEN; Christer Nystrom, Uppsala, SWEDEN; Yvonne Hakansson, Uppsala, SWEDEN; | | | | | |
| ** CONTINUING DATA ***** This application is a 371 of PCT/SE03/01598 10/15/2003 | | | | | |
| ** FOREIGN APPLICATIONS ***** SWEDEN 0203065-8 10/16/2002 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY SWEDEN | SHEETS DRAWING 1 | TOTAL CLAIMS 48 | INDEPENDENT CLAIMS 2 |
| ADDRESS 466 | | | | | |
| TITLE Gastric acid secretion inhibiting composition | | | | | |
| FILING FEE RECEIVED 2430 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |